

FEDERAL COMMUNICATIONS  
COMMISSION

See Instructions for  
information regarding  
public burden estimate

FOR  
FCC  
USE  
ONLY

845177

WRITE  
USE  
ONLY

1. folder marked ✓

**APPLICATION FOR GROUND RADIO STATION AUTHORIZATION  
IN THE AVIATION SERVICES**

DOCKET FILE COPY ORIGINAL

01-287

1. Applicant Name: <b>Utah Jet Center, LLC</b>			2. (A) Number and Street address: <b>2500 North 900 West FL 9</b>		
3. City: <b>Logan</b>			4. State: <b>UT</b>		5. ZIP Code: <b>84321</b>
6. Call Sign (if applicable):		7. Name of person to contact for questions: <b>Brent Roberts</b> Phone #: <b>435753-2221</b> FAX #: ( ) <b>435 755-9608</b>			
8. Applicant Status: <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Governmental Entity <input type="checkbox"/> Partnership <input type="checkbox"/> Association			16. E-Mail Address: <b>jbryan@utahjet.com/broberts@utahjet.com</b>		
9a. Class of Station (see instructions): <b>FAA</b>			9b. Service: <b>AF</b>		
10. Purpose of Application: <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> New Station <input type="checkbox"/> Renewal with Modification <input type="checkbox"/> Modification <input type="checkbox"/> Assignment of Authorization			17. Statement of Eligibility:		
11. Would a Commission grant of your application be an action which may have a significant effect as defined by Section 1.1307 of the Commission's Rules? If "YES", submit the statement as required by Sections 1.1308 and 1.1311. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			18. Transmitter Information (For additional space, use Item 38): Quantity Manufacturer Type Number <b>1 Valcom 760 EZN5PRCOM760</b>		
12. For a MOBILE STATION only, give detailed area of operation:			19. Proposed Hours of Operation: <b>6:30am to 8:00pm</b>		
13. For a GROUND FIXED POINT STATION only, give Name of Landing Area (if any): <b>Logan-Cache Airport (LCU)</b>			20a. Frequencies (kHz or MHz): <b>118 to 136.975</b> <b>123.6 MHz</b>		
14a. Number & Street or other indication of station location: <b>2500 N 900 W. FL-9</b>			20b. Bandwidth and Emission: <b>25 KHZ</b> <b>6K00A3E</b>		
14b. City: <b>Logan</b> County: <b>Cache</b> State: <b>UT</b>			20c. Maximum Output Power: <b>10 watts</b>		
14c. Latitude: <b>41° 47' 26 " N</b> Longitude: <b>14° 51' 16 " W</b>			21. Operational Altitude (if applicable): <b>N/A</b>		
15. Location of Control Point(s) (Other than at the transmitter):					

22. Will service of the station be available to any aircraft desiring to use it? <span style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</span>				
23. Antenna gain 1 to 1 db	24. Azimuth of Major Lobe if directional antenna is used N/A ° East of True North	25. Transmission line loss 3 db	26. Half power Beamwidth N/A	27. Receiving Zone N/A

Use the Antenna Arrangements shown below to answer items 28 through 33d

**ANTENNA ARRANGEMENTS (NOT TO SCALE)**

Figure 1  
Ground Mounted

Figure 2  
Mounted on another structure

Figure 3  
Mounted on an existing antenna structure

28. FCC Antenna Structure Registration Number, or N/A (Notification not Required):	
29. Give the overall height above ground to the tip of your antenna. (a)	(a) 13.5 meters
30. Give the overall height above ground of the highest point of the structure. (b)	(b) 11.5 meters
31. Give the ground elevation above mean sea level at the antenna site. (c)	(c) 1558.9 meters
32. Provide a description of the structure on which the antenna is mounted (examples: building, tower, pole, etc.):  <div style="text-align: center; padding: 10px;">Building</div>	

33a. Has Notice of Construction or Alteration been filed with the FAA?  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	33b. Date Notice Was Filed:	33c. Name Under Which Filed:	33d. FAA Office Where Filed:
34a. FAA Regional Office Notified:		34b. Date of Notification:	

**THIS SECTION APPLIES ONLY TO APPLICANTS FOR AERONAUTICAL ENROUTE AND AERONAUTICAL FIXED STATIONS.**

**APPLICANTS MUST CERTIFY THAT THEY ARE NOT:**

1. An alien or the representative of any alien;
2. A corporation organized under the laws of any foreign government;
3. A corporation of which any officer or director is an alien or of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country.
4. A corporation directly or indirectly controlled by any other corporation of which any officer or more than one-fourth of the directors are aliens or of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country.

35. DOES APPLICANT SO CERTIFY? ☒ YES ☐ NO

36. REMARKS/ADDITIONAL INFORMATION:

The current Unicom license holder and operator has held the license for at least the last 5 year term, and probably longer. This provides that holder-which is the competing FBO on our field-a distinct commercial advantage. We hope to obtain the license for at least alternating terms in order to remove the commercial disadvantage under which we currently operate.

*NIX*  
*W/LOA*

37. ALL APPLICANTS MUST COMPLETE CERTIFICATION, SIGN AND DATE APPLICATION

READ CAREFULLY BEFORE SIGNING:

- \*Applicant waives any claim to the use of any particular frequency regardless of prior use by license or otherwise.
- \*Applicant will have unlimited access to the radio equipment and will control access to exclude unauthorized persons.
- \*Neither applicant nor any member thereof is a foreign government or representative thereof.
- \*Applicant certifies that all statements made in this application and attachments are true, complete, correct, and made in good faith.
- \*Applicant certifies that the signature is that of the individual, or partner, or officer or duly authorized employee of a corporation, or officer who is a member of an unincorporated association, or an appropriate elected or appointed official on behalf of a governmental entity.
- \*Neither the applicant nor any other party to the application is subject to a denial of Federal benefits, that includes FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

SIGNATURE

*[Handwritten Signature]*

DATE

*12/5/00*

NOTICE TO INDIVIDUALS AS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

We have estimated that each response to this collection of information will take on average one hour. Our estimate includes the time to read instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Washington, DC 20554, Paperwork Reduction Project (3060-0020). We will also accept your comments via the internet if you send them to [jboley@fcc.gov](mailto:jboley@fcc.gov). Please DO NOT SEND COMPLETED APPLICATION FORMS TO THIS ADDRESS.

You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0020.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of an FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e)(3) and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.

## **SUPPLEMENTAL STATEMENT**

Pursuant to the instructions for Item 9a of the "Application for Ground Radio Station Authorization in the Aviation Services", the following information is provided with regard to the "Application for Ground Radio Station Authorization in the Aviation Services" of Utah Jet Center :

Owner of Landing Area:	Logan Cache Airport Authority
Date Notified of Application:	November 29, 2000

Aviation Services Organizations:	Great Western Aviation (operating as Logan Air Service)
Date Notified of Application:	November 29, 2000

UTAH JET CENTER, LLC.

FCC

GL Account #  
8890.00

GL Account Name  
Miscellaneous Expense

Aircraft

Job

12/ 5/00

04095


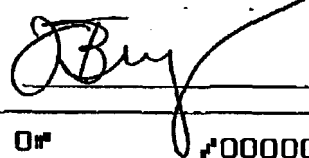
4095  
Amount  
130.00

Unicom permit application fee



Mellon  
Bank

12-11-00 0358130 8130577 4 002 22

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND. THIS PAPER CONTAINS FLUORESCENT FIBERS AND OTHER SECURITY FEATURES.		04095	
	Utah Jet Center, LLC.	ZIONS FIRST NATIONAL BANK	4095 2
	P.O. Box 706 Logan, Utah 84323-0706 435-753-2221	LOGAN, UTAH 84321	
		31-5/1240 00	
		12/ 5/00	
One Hundred Thirty Dollars and No Cents			
FCC			
		130.00	DOLLARS
			
⑈004095⑈ ⑆124000054⑆ 060 11399 0⑈		⑈0000013000⑈	

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
REMITTANCE ADVICE  
FCC/MELLG. DEC 08 2000

04095  
Approved by OMB  
3060-0589  
Page No 1 of 1

(1) LOCKBOX # 358130

SPECIAL USE  
FCC USE ONLY

SECTION A - PAYER INFORMATION

(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) (3) TOTAL AMOUNT PAID (U.S. Dollars and cents)  
UTAH NET CENTER 4C 113000  
(4) STREET ADDRESS LINE NO. 1  
PO BOX 705  
(5) STREET ADDRESS LINE NO. 2  
(6) CITY (7) STATE (8) ZIP CODE  
LOGAN UT 84323  
(9) DAYTIME TELEPHONE NUMBER (include area code) (10) COUNTRY CODE (if not in U.S.A.)  
4357532221

FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED

(11) PAYER (FRN) (12) PAYER (TIN)  
0004078408 870563567

IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B  
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)

(13) APPLICANT NAME  
(14) STREET ADDRESS LINE NO. 1  
(15) STREET ADDRESS LINE NO. 2  
(16) CITY (17) STATE (18) ZIP CODE  
(19) DAYTIME TELEPHONE NUMBER (include area code) (20) COUNTRY CODE (if not in U.S.A.)

FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED

(21) APPLICANT (FRN) (22) APPLICANT (TIN)  
004078408 870563567

COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET

(23A) CALL SIGN/OTHER ID (24A) PAYMENT TYPE CODE (25A) QUANTITY  
P1B1V12 11  
(26A) FEE DUE FOR (PTC) (27A) TOTAL FEE FCC USE ONLY  
113000 113000  
(28A) FCC CODE 1 (29A) FCC CODE 2

(23B) CALL SIGN/OTHER ID (24B) PAYMENT TYPE CODE (25B) QUANTITY  
(26B) FEE DUE FOR (PTC) (27B) TOTAL FEE FCC USE ONLY  
(28B) FCC CODE 1 (29B) FCC CODE 2

SECTION D - CERTIFICATION

(30) CERTIFICATION STATEMENT  
I, JAMES R. BRYAN, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATURE DATE 12/5/00

SECTION E - CREDIT CARD PAYMENT INFORMATION

(31) MASTERCARD/VISA ACCOUNT NUMBER: EXPIRATION  
☐ MASTERCARD  
☐ VISA  
I hereby authorize the FCC to charge my VISA or MASTERCARD for the service(s)/authorization herein described.  
SIGNATURE DATE